



# 2834

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/530,629
	Filing Date	June 19, 2000
	First Named Inventor	Michael Dadd
	Group Art Unit	2834
	Examiner Name	G. Perez
Total Number of Pages in This Submission	Attorney Docket Number	SHP-PT058

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	C. Frederick Koenig III, Esquire Volpe and Koenig, P.C.	Reg. No. 29,662
Signature		
Date	May 22, 2001	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 22, 2001			
Typed or printed name	C. Frederick Koenig III, Esquire		
Signature		Date	May 22, 2001

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Volpe and Koenig, P.C. Revision of PTO/SB/17 (11-00)  
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**COMPLETE FEE TRANSMITTAL**  
**for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$)** 195.00

**Complete if Known**

Application Number	09/530,629
Filing Date	June 19, 2000
First Named Inventor	Michael Dadd
Examiner Name	G. Perez
Group Art Unit	2834
Attorney Docket No.	SHP-PT058

**METHOD OF PAYMENT**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 22-0493

Deposit Account Name: Volpe and Koenig, P.C.

☒ Charge Any Deficiency or Credit any Overpayment in the Total Fees Associated with this Communication

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Fee Code	Large Entity Code	Small Entity Code	Fee Description	Fee Paid
105	130	205	65	
127	50	227	25	
139	130	139	130	
147	2,520	147	2,020	
112	920*	112	920*	
113	1,840*	113	1,840*	
115	110	215	55	
116	390	216	195	
117	890	217	445	
118	1,390	218	695	
128	1,890	228	945	
119	310	219	155	
120	310	220	155	
121	270	221	135	
138	1,510	138	1,510	
140	110	240	55	
141	1,240	241	620	
142	1,240	242	620	
143	440	243	220	
144	600	244	300	
122	130	122	130	
123	50	123	50	
126	180	126	180	
581	40	581	40	
146	710	246	355	
149	710	249	355	
179	710	279	355	
169	800	169	800	

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity Code	Small Entity Code	Fee Description	Fee Paid	
101	710	201	355	
108	320	208	160	
107	490	207	245	
108	710	208	355	
114	150	214	75	

**SUBTOTAL (1) (\$)** 0

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	1	1	
Multiple Dependent	1	1	

**Large Entity Small Entity**

Fee Code	Fee Code	Fee Description		
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)** 0

**3. ADDITIONAL FEES**

Fee Code	Large Entity Code	Small Entity Code	Fee Description	Fee Paid
105	130	205	65	
127	50	227	25	
139	130	139	130	
147	2,520	147	2,020	
112	920*	112	920*	
113	1,840*	113	1,840*	
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116	390	216	195	
117	890	217	445	
118	1,390	218	695	
128	1,890	228	945	
119	310	219	155	
120	310	220	155	
121	270	221	135	
138	1,510	138	1,510	
140	110	240	55	
141	1,240	241	620	
142	1,240	242	620	
143	440	243	220	
144	600	244	300	
122	130	122	130	
123	50	123	50	
126	180	126	180	
581	40	581	40	
146	710	246	355	
149	710	249	355	
179	710	279	355	
169	800	169	800	

**SUBTOTAL (3) (\$)** 195.00

**SUBMITTED BY**

Name (Print/Type)	C. Frederick Koenig III, Esquire	Registration No. (Attorney/Agent)	29,662	Telephone	215-568-6400
Signature		Date	May 22, 2001		

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